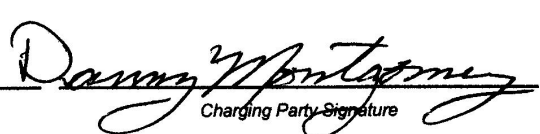


EEOC Form 5 (5/01)

<b>CHARGE OF DISCRIMINATION</b> This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To:      Agency(ies) Charge No(s): <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC	
OCRC _____ and EEOC _____ <small>State or local Agency, if any</small>			
Name (indicate Mr., Ms., Mrs.) <b>Mr. Danny Montgomery</b>		Home Phone (Incl. Area Code) <b>419-560-2192</b>	Date of Birth
Street Address <b>4539 Henry Road, Shelby, Ohio 44875</b>		City, State and ZIP Code	
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name <b>Sedgwick Claims Management Servs, Inc</b>		No. Employees, Members <b>15+</b>	Phone No. (Include Area Code) <b>888-436-9550</b>
Street Address <b>P.O. Box 182808 Columbus, Ohio 43218</b>		City, State and ZIP Code	
Name		No. Employees, Members	Phone No. (Include Area Code)
Street Address		City, State and ZIP Code	
DISCRIMINATION BASED ON (Check appropriate box(es).) <input type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input checked="" type="checkbox"/> DISABILITY <input type="checkbox"/> OTHER (Specify below.)		DATE(S) DISCRIMINATION TOOK PLACE Earliest      Latest <b>9/23/2020      9/23/2020</b> <input checked="" type="checkbox"/> CONTINUING ACTION	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)): I am disabled as that term is defined by the Americans with Disabilities Act. I suffer with a mental health disability. I was employed by the Richland County Engineer from September 29, 2005 until January 4, 2021 as a Highway Maintenance Worker II. Sedgwick is the agent of the Richland County Engineer. Because of my mental health issues, I have been undergoing counseling and treatment since 2019. From August 10, 2020 until October 29, 2020, I was on an approved Family Medical Leave because I was suffering with symptoms of my disability and was receiving treatment and counseling. Because I was suffering with symptoms of my disability and taking new medication, I was unable to perform the essential functions of my job while I was on medical leave. My symptoms included the inability to think rationally, process information fully and accurately, lack of sleep, mood swings, stress, and anxiety. On September 23, 2020 I received a telephone call from a Sedgwick representative who was calling on behalf of the Engineer's office regarding my ongoing need for leave of absence. (CONTINUED ON NEXT PAGE)			
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY – When necessary for State and Local Agency Requirements	
I declare under penalty of perjury that the above is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT	
Date <b>7-8-21</b> 		SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year)	

**EXHIBIT**  
**C**

EEOC Form 5 (5/01)

<b>CHARGE OF DISCRIMINATION</b> This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: Agency(ies) Charge No(s): <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC
_____ and EEOC State or local Agency, if any		
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)): <p>Given my state of mind and symptomatology, I should not have taken the call, but my wife was at work and so I picked up the phone.</p> <p>I do not clearly remember the phone call, but it was recorded by the Sedgwick Representative.</p> <p>During the phone call, I told the Sedgwick Representative about my extreme symptoms, my diagnoses and treatment, including the fact that I was currently undergoing counseling and taking medications to help me deal with my issues.</p> <p>I mentioned that I had violent thoughts of harming others, including my co-workers. I talked about having suicidal thoughts. I recounted harassment that I was suffering at work.</p> <p>I repeatedly stated that I loved my job, that I was a good worker, and wanted to return to work.</p> <p>I was rambling and anyone who knows me would have been able to tell that I was in the throes of a mental health crisis, which was the reason I was on a leave of absence.</p> <p>I had no intention of acting on my thoughts, nor have I committed any acts of violence toward my co-workers or myself.</p> <p>After the phone call, I continued on leave for another month and continued receiving treatment.</p> <p>I was released to return to work on October 29, 2020 with a return-to-work date of November 1, 2020.</p> <p>I fully expected to return to work and perform my duties without restriction.</p> <p>I also expected to continue receiving treatment upon my return to work, including ongoing counseling.</p> <p>Based upon my telephone conversation with the Sedgwick Representative, the Engineer refused to allow me to return to work and I was subsequently terminated.</p> <p>The Engineer cited the comments made during the phone call with Sedgwick as the reason for the discipline/termination.</p> <p>Sedgwick conveyed the entire content of the telephone call to Defendant Engineer on or about September 23, 2020.</p> <p>The September 23, 2020 telephone call made by Defendant Sedgwick was a medical inquiry as that term is defined by 42 USC §12112(d).</p> <p>When making the call, Defendant Sedgwick was acting within the course and scope of its agency to Defendant Engineer.</p> <p>Defendant Sedgwick violated the ADA by revealing the entire content of that telephone call to Defendant Engineer.</p> <p>The ADA permits information obtained about an employee's medical condition or history to be shared with supervisors and managers for the limited purpose of determining necessary restrictions on the work or duties of the employee and providing necessary accommodations.</p> <p>Because Defendant Sedgwick makes FMLA decisions on Defendant Engineer's behalf, there was no lawful reason for Sedgwick to inform Defendant Engineer about the contents of the telephone call.</p>		
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY – When necessary for State and Local Agency Requirements
I declare under penalty of perjury that the above is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT
7/8/21 Date		SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year)
Danny R. Montgomery Charging Party Signature		